

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 720604	RECEIPT DATE:	12 / 26 / 00
IA NUMBER:	PCT/ AU99 / 00514	IA FILING DATE:	06 / 25 / 99
FAMILY NAME:	ANDERSON	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	IAN	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	06 / 29 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	11932/1	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX
NAME:	KENYON & KENYON		
STREET:	ONE BROADWAY		
CITY:	NEW YORK		
STATE/COUNTRY:	NY	ZIP:	10004
EMAIL:			
APPLICATION TITLES:			
	PLUG AND GLAND ASEPTIC PACKAGE SYSTEM		

TAB TO LAST POSITION,PUSH SEND